

**LEGISLATIVE SERVICES AGENCY
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS**

200 W. Washington, Suite 301
Indianapolis, IN 46204
(317) 233-0696
<http://www.in.gov/legislative>

FISCAL IMPACT STATEMENT

LS 6798

BILL NUMBER: HB 1471

NOTE PREPARED: Dec 27, 2002

BILL AMENDED:

SUBJECT: Poster Concerning Availability of Immunizations.

FIRST AUTHOR: Rep. Oxley

FIRST SPONSOR:

BILL STATUS: As Introduced

FUNDS AFFECTED: **GENERAL
DEDICATED
FEDERAL**

IMPACT: State & Local

Summary of Legislation: This bill requires the State Department of Health to develop and distribute an immunization poster to physicians who immunize children and requires physicians to display the poster so that the poster is visible to the parent or guardian of the child. The bill allows the Medical Licensing Board to discipline a physician who fails to display the poster.

Effective Date: July 1, 2003.

Explanation of State Expenditures: The State Department of Health estimates that a plain 11"x17" poster containing the information required by the bill would cost approximately \$20 per 1,000 for non-laminated poster stock or \$150 per 1,000 for laminated stock. Mailing cost would be about \$3 per poster. The poster is required to include information regarding the age at which a state-required immunization is required to be given. This information is based on the recommendations of the U.S. Public Health Service Advisory Committee on Immunization Practices (ACIP) and is commonly subject to change according to the Department. Changes in the ACIP recommendations may require the issuance and mailing of new posters more than once a year depending upon the specific revisions. If the Department mails 750 posters to about one-half of the licensed physicians, the cost will be \$2,400 to \$3,375, depending on the paper selected. Any revisions to the poster that require additional distributions would result in additional cost.

(The Department distributes posters for other immunization program initiatives, such as the new immunization registry, that are developed and printed by the federal agency for distribution in Indiana. These posters do not include all of the information required to be posted in physician's offices by this bill.)

The Department of Health reports that currently patients that receive immunizations at local health

department clinics under the federal Public Health Service (PHS) 317 program are commonly referred to the clinics by their physicians. However, if this bill would result in additional patients going to the clinics for immunizations, the cost of vaccinating these children may exceed the ability of the Department to purchase the vaccine with 100% federal PHS 317 dollars. If the children present at the clinics, the Department is obligated to provide the vaccination for state-required immunizations. If federal dollars are not sufficient to buy all the required vaccine, state funds would be necessary to supplement the immunization program. The extent of the fiscal impact to the immunization program would depend upon the increase in the numbers of patients with insurance that does not cover immunizations that present for immunizations at the local health clinics above the current population.

Explanation of State Revenues:

Explanation of Local Expenditures: Local health departments provide the staff and infrastructure for this program. The fiscal impact would be dependent upon the extent to which any additional demand for immunization administration can be accommodated within the existing resources.

Explanation of Local Revenues:

State Agencies Affected: State Department of Health.

Local Agencies Affected: Local Health Departments.

Information Sources: Zach Cattell, Legislative Liaison for the Department of Health, (317) 233-2170, and Wendy Gettlefinger, Assistant Commissioner for Children and Family Health Services.

Fiscal Analyst: Kathy Norris, 317-234-1360